Form Approved. OMB No. 2050 0028. Expriss 10 \$1 91

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Please retar to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 or the Resource Conservation and Resource Conservation and Resource Conservation).



Date Received (For Official Use Only)

OCT 2 9 1998

ECONOMISSION AND AND SHOWER AND	nial Protection Agency
I. Installationic EPA ID: Number (Mark X In the appropriate box)	Constellation's EPA ID Number
A: First Notification	CAD0431001064
II. Name of Installation (Include company and specific site name	Parameter and the second secon
ELISEQUINDO C/EDA	ersakaundru
Ill. Location of Installation (Physical address not P.O. Box of Ros	ite Number)
Street	
651 West KWOXI IS	Treell
Street (continued)	
	State ZIR Code
City of Town	1 (490348-11
Old Gland	
County Code (Courty Name	
We nething a properties and second energy	
Street or R.G. Blox	ABOUT
City of Town	Sigle ZiP Code
V Installation Contact (Person to be confector) reparating waste	valeillet at site
PERSONAL PROPERTY OF THE PERSON OF THE PERSO	
Jamshid-BEROUXAI	M
	hone Number (area code and number)
Owner	
Visingialiation economic suggrance signification instructions)	
Ay Conjust Addition p. Street of Si(6) Bib).	
Cocation Malling	
City or Town	State ZIP Code
Vir. Ownership (Spc/nStructions)	
A: Name of installation's Legal Owner	A Pro-
JAMSHID-BEROUKHI	M
Street, P.O. Box, or Route Number	
651 WEST KWOX ST	REET
- City or Town	State ZIP Code
GARDEWALL	CA 902 48-
B)Land Type 1	Diowner Type D. Change of Owner (Date Changed) Indicator Month Day Year
Phone Number (area code and number)	Yes No.

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the life with the second secon	PROPERTY AND THE ROTT OF THE PROPERTY OF THE P
VIII. Type of Regulated Waste Activity (Mark X in the approprie	te boxes. Refer to Instructions.)
A. Hazardous Waste Activity	B. Used Oil Fuel Activities
1. Generator (See Instructions)	Disposar (at Installation)
a. Greater than 1000kg/mo (2,200 lbs.) Note: A permit b100 to 1000 kg/mo (220 - 2,200 lbs.) Hazardous Was	recibled for a Generator Marketing to Burner b. Generator Marketing to Burner b. Generator Marketing to Burner
C. Less than 100 kg/mo (220 lbs.)	larketing to sumer - C. Burner - Indicate device(s)
2. Transporter (Indicate Mode in boxes 1-5 below) 6.2 Other Mark  a. For own waste only 2.2 C. Burner in	(Cate - Byce (s) Utility Boller
b. For commercial purposes	mbustion Device to 2 Industrial Boller 2 Industrial Furnace 3. Industrial Furnace
1 Air	strial Bolie
2. Rall	Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims
4. Water	laction (Statio) the Oil Meets the Specification
5. Other - specify	
IX. Description of Regulated Wastes (Use additional sheets II)  A. Characteristics of Nonlisted Hazardous Wastest, Mark IX in the box	Service Maria 2 Color
Wastes your installation handles: (See 40 CFR Pars 261:20 261:24)	
1 ignitable 2 Corrosive 3 Reactive 4 Toxicity (D001) (D002) (D003) Charactersic	st specific EPA hazaidous waste number(s) for the Toxicity.
	Characteristic Contaminant(s))
B. Listed Hazardous Wastes. (See 40 CFR 261.31, 33. See Instruction	abitances and and shall doctors
7 8 9 9 4 8	30 31
C. Other Wastes. (State or other wastes requiring an I.D. number. See it	Sinucilons
2	6.2
X. Certification	
I certify under penalty of law that I have personally examine	d and am familiar with the Information submitted in this
and all attached documents, and that based on my Inquisition obtaining the Information, I believe that the submitted inf	ilry of those individuals immediately responsible for
that there are significant penalties for submitting false imprisonment.	
Signature / / / Name and Official Title	(type or print) Date Signed
Jameshid Gerande OWNGRI	Amshid Beroukthn 10/23/98
XI. Comments	
	XC W York Town Comments of the
A CARLEGARD OF THE	TO THE PROPERTY OF STREET
tote: Mail completed form to ine appropriate EPA Regional or State.	Juicevisee Section III of the Doordet for addressess)

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## Regulated Waste Activity

Date Received (For Official Use Only)

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EPA Form 8700-12 (07-90) Previous edition is obsolete.

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VIII. Type of Regulated Waste Activity (A	Mark X' in the appropriate b	oxes. Refer to instruction	<b>is.)</b>
A. Hazardoùs V	Vaste Activity	B. Used	Oil Fuel Activities
1. Generator (See Instructions) a. Greater than 1000kg/mo (2.200 lbs.) b. 100 to 1000 kg/mo (220 - 2.200 lbs.) c. Less than 100 kg/mo (220 lbs.) 2. Transporter (Indicate Mode in boxes 1-5 a. For own waste only	Hazardous Waste Fu	lifed for critical and critical	Specification Used Oil Fuel Generator Marketing to Burner Other Markerer Burner - Indicate device(s) - Type of Combustion Device
b. For commercial purposes  Mode of Transportation  1. Air 2. Rail 3. Highway 4. Water 5. Other - specify	Type of Combus  i. Utility Boil  2. Industrial  3. Industrial  5. Underground Injection	ion Device er Boller: 1 Furnace 2 2 Si	2. Industrial Boiler 3. Industrial Fumece  Decification Used Oil Fuel Marketer r On-site Burner) Who First Claims a Oil Meets the Specification
IX. Description of Regulated Wastes (Us	e additional sheets if heces		
A. Characteristics of Nonlisted Hazardous wastes your installation handles. (See 40 Concepts)  1. Ignitable 2. Corrosive 3. Reactive (D001) (D002) (D003)	FR Paris 261 20 261 24)  Toxicily Characteristic (List sp.	cito EPA Hazardous waste n Characteristic contam	Imber(s) for the Toxicity inant(s)).
C. Other Wastes. (State or other wastes requ	iring an I.D. number. See instruc	tions:)	5 12 12 6
X. Certification			
I certify under penalty of law that I have and all attached documents, and the obtaining the Information, I believe that there are significant penalties imprisonment.	nat based on my Inquiry of that the submitted Informa	of those Individuals Im ation is true, accurate,	mediately responsible for and complete. I am aware
Signature	Name and Official Time (type	or printy ng oc	Date Signed 7-2-98
XI, Comments			
	1		

Please print or typ	e with ELITE type	a (12 characters linch)	in the unshaded areas only.
I todae bittle of typ	C AAIGH CTITE TAD	c i i & ciiai ac tare/ilicii/	ill the distincted dieds only.

SEPA	NOTIFICATION OF HAZARDOUS WASTE ACTIVITY	INSTRUCTIONS: If you received a preprinted label, affix it in the space at left, If any of the
INSTALLA- TION'S EPA I.D. NO.	CAD943190196	information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is
I. STALLATION  INSTALLATION  INSTALLATION  II. MAILING	FELEDYNE LINAIR ENGINEERING	complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated,
LOCATION III. OF INSTAL- LATION	GARDENA, CA 90248 651 W KNOX GARDENA, CA 90248	treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).
FOR OFFICIAL	USE ONLY	
FOR OFFICIAL  C C IIIIIIIIIIIIIIIIIIIIIIIIIIIII	ON'S EPA I.D. NUMBER APPROVED DATE RECEIVED (yr., mo., & day)	55
FCADØ4		1 198n 00041
I. NAME OF INS	TALLATION 15 16 17 - 32	
T E L E D	YNELINAIR ENGINEERING	67
II. INSTALLATION	ON MAILING ADDRESS  STREET OR P.O. BOX	A COMPANY DESCRIPTION
3		
15   16	CITY OR TOWN ST. ZIF	CODE
4 15 16	40 41 42 47	- 51
III. LOCATION	OF INSTALLATION STREET OR ROUTE NUMBER	
5		
15 16	CITY OR TOWN ST. ZIP	CODE
6		- 51
IV. INSTALLAT		
c MAYO	PAUL MGR. MANUFACTURING	PHONE NO. (area code & no.)  2 1 3 - 5 3 2 - 5 9 8 0
V. OWNERSHIP		45 46 - 46 49 - 51 52 - 55
	A. NAME OF INSTALLATION'S LEGAL OWNER	
TELED	YNEIINC.	55
enter the appropri		nter "X" in the appropriate box(es)) TRANSPORTATION (complete item VII)
F = FEDERAL M = NON-FE	DERAL C. TREAT/STORE/DISPOSE D.	UNDERGROUND INJECTION
VII. MODE OF T	RANSPORTATION (transporters only – enter "X" in the appropriate	box(es))
A. AIR	B. RAIL C. HIGHWAY D. WATER E. OTHER	a (specify):
Mark "X" in the app	SUBSEQUENT NOTIFICATION  propriate box to indicate whether this is your installation's first notification of haz st notification, enter your Installation's EPA I.D. Number in the space provided by	cardous waste activity or a subsequent notification. elow.
	NOTIFICATION B. SUBSEQUENT NOTIFICATION (complete item	
	N OF HAZARDOUS WASTES rse of this form and provide the requested information.	
EPA Form 8700-12		CONTINUE ON REVERSE

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